SENATE BILL 1063 By Herron

AN ACT to amend Tennessee Code Annotated, Title 56, Chapter 7, relative to laboratory access and services in the interest of patient safety.

WHEREAS, it is of the utmost importance for health care providers to have access to laboratory results in a timely manner for emergency situations; and

WHEREAS, there is often a delay in receiving laboratory results particularly for patients and providers in rural areas; and

WHEREAS, the health and lives of patients may depend on quick access to the results of laboratory tests; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 56, Chapter 7, Part 23, is amended by adding the following language as a newly designated section:

Section 56-7-2363.

- (a) When laboratory test results are deemed by the physician to be needed in twenty-four (24) hours or less, no health insurance issuer and no managed health insurance issuer may:
 - (1) Deny any medical laboratory licensed pursuant to title 68, chapter 29, the right to participate as a participating provider in any policy, contract or plan on

the same terms and conditions as are offered to any other medical laboratory under the policy, contract or plan;

- (2) Prevent any provider who is providing medical services to a party or beneficiary of any policy, contract or plan from selecting a licensed medical laboratory to furnish services offered under any contract, policy or plan; or
- (3) Permit or mandate any difference in coverage or impose any different conditions.
- (b) Any violation of this section shall be deemed as an unfair or deceptive act or practice under the Tennessee Consumer Protection Act of 1977, codified as Tennessee Code Annotated, Title 47, Chapter 18, Part 1, and any person, including any consumer or licensed provider, who suffers an ascertainable loss of money or property as a result of such violation is entitled to maintain a private right of action to recover damages pursuant to § 47-18-109.

SECTION 2. The provisions of this act shall not apply to health plans preempted from state regulation by the Employee Retirement Income Security Act of 1974 ("ERISA").

SECTION 3. The provisions of this act do not apply to any publicly funded insurance plan.

SECTION 4. If any provision of this act or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to that end, the provisions of this act are declared to be severable.

SECTION 5. This act shall take effect July 1, 2003, the public welfare requiring it.

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